

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s)	rura M. Weston	1	
II. Name of lobbyist's partnership	, firm or corporation, if any:		
MM Weston + A (Name of partnershi	·		· · · · · · · · · · · · · · · · · · ·
PO BOX 990		NH	03302
Business Address: (Street)	Concord (Town/City)	(State)	(Zip Code)
(lab) 224 · 4077 (Telephone)	(403) 224 - 4099 (Fax)	e-mail Maura	e mmweston, on mic
III. This statement covers: (Choos reportable expense transactions w			y file a separate report for
All reportable transactions occur	rring in the months prior to the	reporting date relative to th	e following client:
New England Cable (Full Name of	e and Telecome of Client as it appears on the Lobby	munications) ist Registration Form)	Association
OR ☐ All reportable transactions by the unrelated to any particular client.			
IV. Date of Report April 26, 2 Reports cover: activity from date of	017	July 26, 2017	
October 25 activity from 7		January 31, 2018 🗹 activity from 10/1/17 to 12/31	/17
V. There have been no fees rec If this box is checked, complete just Concord, NH 03301.	eived and no reportable tra this form and submit it to the S	ansactions made since t ecretary of State's Office, S	he last report. \Box State House, Room 204,
VI. Check if additional reports ar	e attached:		
If you have received fees or ma	-		
 If you have paid an honorarium Expense Reimbursement 	or reimbursed expenses, you m	ust file Addendum B – Re	port of Honorariums or
If you, your firm, or your famil	y has made political contributio	ns, you must file Addendu	m C- Political Contributions
Sworn Statement/Affirmation by I have read RSA 15, RSA 15-B, RS and complete to the best of my kno	A 14-C and RSA 664 and hereb	by swear or affirm that the	foregoing information is true
1/1/10		1-31-18	
(Signature of lobbyist)		(Da	te)
Maura M. Weston (Print Name of lobbyist)			

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Maura M. Weston	
II. Name of lobbyist's partnership, firm or corporation, if any:	
MM Weston & Associates, PLLC (Name of partnership, firm or corporation)	
III. Name of Client New England Caby and Telecommunications Associa	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, governmen including research, monitoring legislation, and related legal work. The greeduced by any expenses:	e that are related, directly or indirectly it relations, or public relations service
a) Total of all fees received in this reporting period	a)\$_12,000-
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y	b) \$ 34,007 (ear)
c) Total of all fees received to date (Add lines a and b)	c)\$_48,000
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to reffees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report a Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for exampl lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses pair expenses; (b) the aggregate total of alle: meals purchased during a business st than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for the period of greater than \$25, purchase of the er than \$25, but not greater than \$50, expense reimbursement, or political
 a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. b) Total aggregate of expenditures during this reporting period, not reported 	a)\$
in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d)\$ /2,000
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e)\$_36,100
f) Total of all expenses year to date	ns 48,000
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
*	***************************************
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	
1ADD	1-31-18
(Signature of lobbyist)	(Date)
Maura M. Weston	
(Print Name of lobbyist)	